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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**OFFICIAL**

Application No.: 10/052,329
Applicant: Hart et al.
Filed: January 18, 2002
TC/A.U. 3731
Examiner: Davis, Daniel J.
Docket No.: AUS-1828-AL
Customer No.: 21378

Confirmation No.: 1170

Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

RESPONSE

Dear Sir:

This response is being filed in response to the final Office action mailed April 8, 2004. If necessary, please charge any deficit or credit any surplus to Deposit Account No. 01-2215.

Complete Listing of the Claims begins on page 2 of this paper.

Remarks begin on page 8 of this paper.

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CERTIFICATE OF FACSIMILE TRANSMISSION
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Trademark Office (Fax No. (703) 872-9306) on
July 6, 2004

Barbara Johnson
(Type or print name)

Barbara Johnson
(Signature)

Dear Sirs:

Attached please find the following documents submitted for filing in reference to the above-referenced application.

1. Response with Exhibit A;
2. Amendment transmittal; and
3. Transmittal.

Respectfully submitted,

Barbara Johnson

Barbara Johnson
Applied Medical Resources

CUSTOMER NO.: 21378

FORM PTO-1053 (fee 10/95)

AMENDMENT TRANSMITTAL LETTER

In re application of: Hart et al.
Serial No.: 10/052,329
Filed: January 18, 2002
For: IMPROVED SURGICAL CLIP

Attorney Docket No.: AUS-1828-AL

Examiner: Daniel J. Davis

Group Art Unit: 3731

Mail Stop No Fee Amendment
Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

- [X] Small entity status of this application under 37 C.F.R. 1.9 and 1.27 has been established by a verified statement previously submitted.
[] A verified statement to establish small entity status under 37 C.F.R. 1.9 and 1.27 is enclosed.


The filing fee has been calculated as shown below:

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA
TOTAL	22	MINUS	25	0
INDEP.	3	MINUS	3	0
[] First Presentation of Multiple Dep. Claim				

SMALL ENTITY			OTHER THAN SMALL ENTITY	
RATE	ADDIT. FEE	or	RATE	ADDIT. FEE
x 9	0		x 18	-0-
x 42	0		x 84	-0-
+140	-	or	+280	-0-
Total Addit. Fee	\$		Total Addit. Fee	\$

- ☐ Please charge my Deposit Account No. 01-2215 in the amount of \$ _____. A duplicate copy of this sheet is attached.
- ☐ Check No. _____ in the amount of \$ _____ is attached for payment of filing and extension fees for this amendment and Notice of Appeal filing fee.
- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 01-2215.
A duplicate copy of this sheet is enclosed.
[X] Any additional filing fees required under 37 C.F.R. 1.16.
[X] Any patent application processing fees under 37 C.F.R. 1.17.

Respectfully submitted,


Kenneth K. Vu
Attorney for Applicant

Date: July 6, 2004
CUSTOMER NO.: 21378
Telephone (949) 713-8000
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PTO/SB/21 (02-04)

Approved for use through 07/31/2006. OMB 0851-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/052,329	
	Filing Date	January 18, 2002	
	First Named Inventor	Hart	
	Art Unit	3731	
	Examiner Name	Cavis, Daniel J.	
Total Number of Pages in This Submission	32	Attorney Docket Number	AUS-1828-AL

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <i>Amendment Transmittal</i>
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	KENNETH K. VU
Signature	<i>[Signature]</i>
Date	7/6/04

CERTIFICATE OF TRANSMISSION/MAILING	
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.	
Typed or printed name	BARBARA JOHNSON
Signature	<i>[Signature]</i>
Date	7-6-04

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 422 and 37 CFR 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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